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***CHILD-FOCUSED PARENT COMMUNICATION  
LOG***

For very young children who are newborns to at least age 7, the parents should undertake providing complete information regarding the child's status at the time of transition from one parent home to the other. Such a log may continue to be utilized by the parents beyond age 7 if the parents are still unable to appropriately communicate by direct means.

The log will not include personal comment about the other parent but will only include information about the child for the child's best interest. The following would be the basic subjects to covered at the time of transition:

***HEALTH-RELATED INFORMATION:***

- Any current, diagnosed condition of the child.
- Any medication or procedures to be followed regarding a current health condition
- The time of the last administration of any medication or treatment for the child, including any over-the-counter medications
- Any signs or symptoms to be monitored regarding the child's condition and action to be taken if symptoms emerge
- If a condition is emerging ("Susan started having a runny nose this morning and is saying her throat is starting to hurt"), full information should be provided to the receiving parent to allow appropriate action to be taken

***BEHAVIORAL INFORMATION:***

Continuity between homes regarding discipline and changes in behavior will always benefit the child and keep the focus on the child. In young children, behavior changes

may occur in a child representing an on-time developmental shift. The exchange of information between parents and strategies being used will help the child in their emotional and social growth. Behaviors which appear and are not developmentally based may indicate emerging problems to be addressed. If both parents are observing the behaviors and provide consistent feedback, appropriate measures can be taken to benefit the child. The parents should relate:

- Any new, observed behaviors
- Measures taken and the success or outcome of the strategy used
- Any changes in discipline which are successfully addressing behaviors
- Questions regarding behaviors
- New competencies of the child (“He has almost mastered tying his shoe”)
- Nightmares or fears emerging
- Cautions regarding new dangerous behaviors (“He has started running from me in stores and sees it as a game”)
- To support the relationship of the child with the other parent, one may convey a suggestion to ask the child about a recent experience in the child’s life.

***OTHER INFORMATION PERTINENT TO THE CHILD’S WELLBEING***

- When the child last ate
- Any concerns or positive comments about the child’s eating (did not eat much all day; ate meatloaf, potatoes and green beans and ate well at 5:30pm today)
- Any changes in bathroom outcomes such as the consistency of bowel movements, etc. For children in diapers, the last diaper change or any rash problems.
- Information regarding the child’s sleep. Ideally, both homes should be consistent in waking time, time to bed and nap times. Any variation in sleep patterns should be recorded.

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